Please	type a	a olus	sian (	+) ins	ide this	box
	,, pc (	בטוק ב	3.9 (	. / 1113	IUC UIIS	OUX

PTO/SB/81 (10-00)

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

## **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	09/675,020
Filing Date	September 28, 2000
First Named Inventor	Robert S. Matson
Group Art Unit	2835
Examiner Name	
Attorney Docket Number	2014-181

I hereby appoint:							
Practitioners at Customer Number 22471	Place Customar						
OR	Label here						
Practitioner(s) named below:	AMERICAN DEPOSIT OF THE PROPERTY OF THE PROPER						
Name	Registration Number						
· · · · · · · · · · · · · · · · · · ·	<u> </u>						
· · · · · · · · · · · · · · · · · · ·							
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all							
business in the United States Patent and Trademark Office connected therewith.							
Please change the correspondence address for the above-identified application to:							
x The above-mentioned Customer Number.							
OR .							
Firm or Individual Name	·						
Address							
Address							
City	State Zip						
Country							
Telephone	ax						
I am the:							
Applicant/Inventor.							
Y Assigned of record of the paties interval Q and OFR and							
X Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
SIGNATURE of Applicant or Assignee of Record							
Name Deborah J. Stouff	Deborah J. Stouff						
Signature aleborary. Stauff	deboras J. Stauff						
Date February 8, 2001							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
Cx*Total of 1 forms are submitted.							